

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

| | | |
|---------------------------------------|---|--------------------|
| Applicants: PATRICK M. HUGHES, et al. |) | Examiner: |
| Serial No.: Pending |) | Group Art Unit: |
| Filed: Herewith |) | |
| For: STABLIZED BIODEGRADABLE |) | |
| NEUROTOXIN IMPLANTS |) | Irvine, California |

NON-PROVISIONAL PATENT APPLICATION TRANSMITTAL LETTER


Mail Stop: Patent Application
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Sir/Madam:

Enclosed herewith are the following documents:

- (x) Application Data Sheet – 4 pgs.
- (x) Transmittal Letter – 3 pgs.
- (x) Specification (39 pages) 33 Claims (5 pages); Abstract (1 page)
- () Drawings (- 0 - sheet)
- (x) Declaration/Power of Attorney
- (x) Assignment with Recordation Cover Sheet
- () Information Disclosure Statement with cited art
- (x) Return/postage paid Postcard
- (x) Express Mail Certificate No. EV193721116US

Dated: APRIL 15, 2004


 Stephen Donovan
 Registration No. 33,433

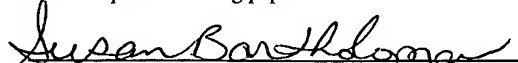
CERTIFICATE OF EXPRESS MAIL UNDER 37 C.F.R. §1.10

I hereby certify that this Transmittal Letter and above-identified documents are being deposited with the United States Postal Service on APRIL 15, 2004 in an envelope as "Express Mail Post Office To Addressee" mailing label number **EV193721116US** with sufficient postage for Express Mail addressed to Mail Stop: Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Susan Bartholomew

Name of person mailing paper

Date: APRIL 15, 2004


 Signature of person mailing paper

NEW APPLICATION TRANSMITTAL FORM

To the Commissioner for Patents:

This is a Request for filing a NON-PROVISIONAL patent application under 37 CFR 1.53(b) entitled **STABLIZED BIODEGRADABLE NEUROTOXIN IMPLANTS** by the following named inventors:

| | | | | | |
|---|---------------------------|--|--|--|---------------------------|
| 1 | Full Name of Inventor | Last Name: HUGHES | First Name: PATRICK | Middle Name: M. | |
| | Residence and Citizenship | City: ALISO VIEJO | State or Foreign Country: CALIFORNIA | Country Of Citizenship: U.S.A. | |
| | Post Office Address | Post Office Address: 2 Somerset Drive | City: ALISO VIEJO | State or Country: CALIFORNIA | Zip Code: 92656 |
| 2 | Full Name of Inventor | Last Name: OLEJNIK | First Name: OREST | Middle Name: | |
| | Residence and Citizenship | CITY: COTO DE CAZA | State or Foreign Country: CALIFORNIA | Country Of Citizenship: U.S.A. | |
| | Post Office Address | Post Office Address: 5 Addington Place | City: COTO DE CAZA | State or Country: CALIFORNIA | Zip Code: 92679 |
| 3 | Full Name of Inventor | Last Name: | First Name: | Middle Name: | |
| | Residence and Citizenship | City: | State or Foreign Country: | Country Of Citizenship: | |
| | Post Office Address | Post Office Address: | City: | State or Country: | Zip Code: |

(X) The Commissioner is hereby authorized to use Deposit Account Number 01-0885 for the payment of any extension fees incurred during the prosecution of this application.

(X) Enclosed is a specification of 39 pages, 33 claims (5 pages) and an abstract (1 page).

Oath or Declaration

(X) Enclosed is an executed oath or declaration.

(X) A self-addressed return postcard is enclosed for verification of receipt.

(X) The filing fee is calculated below:

| FOR | NUMBER FILED | NUMBER EXTRA | RATE | FEE |
|---|-----------------|-----------------|------------|------------------|
| Basic Fee (Large entity) | | | \$770.00 | \$770.00 |
| Total Claims | 33 minus 20 = | -13- | \$18.00 | \$234.00 |
| Independent Claims | 4 minus 3 = | -1- | \$86.00 | \$86.00 |
| If application contains any multiple dependent claims, then add | | | \$290.00\$ | 0.00 |
| TOTAL FILING FEE | | | | \$1090.00 |


- (X) The Commissioner is hereby authorized to charge the filing fee and excess claim fees (including multiple dependent claim fee) as stated above to Deposit Account No. 01-0885. If this amount is incorrect, or for payment of any other fees that may be incurred as a result of this communication please use said Deposit Account. A duplicate copy of this sheet is enclosed for that purpose.
- (x) An Assignment with the Recordation Cover Sheet, bestowing all interest in this application to Allergan, Inc., is enclosed.
- () New drawing(s) are enclosed in -0- sheets.
- () A Statement Pursuant to 37 CFR §1.821(f) and a labeled diskette containing the computer readable sequence listing is enclosed.
- () A Statement Pursuant to 37 CFR §1.821(e), stating that the paper copy and the computer readable form are identical is filed herewith.
- () A properly labeled computer readable form of the Sequence Listing accompanies this Application.
- (x) The Power of Attorney in this application is to Stephen Donovan, Registration Number 33,433.
- (x) The Power of Attorney appears in the Combined Declaration and Power of Attorney, filed herewith.

Please address all future communications to:

STEPHEN DONOVAN
 Registration No. 33,433
 ALLERGAN, INC.
 2525 Dupont Drive, T2-7H
 Irvine, CA 92612
 Tel: 714-246-4026 Fax: 714-246-4249

Respectfully submitted,

Date: April 15, 2004


 Stephen Donovan
 Registration No. 33,433
 Attorney of Record